BEST AVAILABLE COPY

									Application or Docket Number					
	PATENT A	APPLICATIO Effecti	RD	09/1000-144										
				_ED - PART I Column 1)		(Column 2)		SMALL ENTITY TYPE		OR	OTHER THAN SMALL ENTITY			
TC	TAL CLAIMS						RATE		FEE		RATE	FEE		
FO	R	NUMBER FILED		NUMBER EXTRA			BASIC F	EE	\$375	OR	BASIC FEE	\$750		
то	TAL CHARGEA	minus 20=		*			X\$ 9	=		OR	X\$18=			
IND	EPENDENT CL	minus 3 =		*			X42=		:	OR	X84=			
MU	LTIPLE DEPEN	IDENT CLAIM PF	RESENT					+140:		·	OR	+280=		
* If	the difference	in column 1 is l	less than zero, enter		"0" in column 2			TOTA		• .	OR	TOTAL		
CLAIMS AS AMENDED - PART II									- L] 🗸	OTHER	THAN	
(Column 1)					Column 2) (Column 3)			SMALL ENTITY			OR			
AMENDMENTA		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	. TI	ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	* 15	Minus	** 70	>	= R		X\$ 9=			ÖR	X\$18=		
	Independent	· 3	Minus	***	<u> </u>	= 0		X42=		Q	OR	X84=		
	FIRST PRESE	JLTIPLE DEF	TIPLE DEPENDENT		CLAIM		+140;			OR	+280=			
								ТОТ	AL			TOTAL		
	(Column 1) (Column 2) (Column 3)								ODIT FEE			OH ADDIT FEE		
AMENDMENT B		CLAIMS REMAINING		HIGH NUMI	EST,	PRESENT			1.7	ADDI-		g sa ugʻetar iki Mari 10 Sillegad	ADDI-	
		AFTER AMENDMENT		PREVIC	DUSLY -	EXTRA	1889	RATE	44 / LOUIS	ONAL FEE		RATE	JIONAL FEE	
	Total 4		Minus 📇					X\$ 9≣			ÖR'	X\$18≝⊹		
	Independent		Minus	104791112 1 *** 1450			2.	X42 <u>=</u>			OR	X84≐		
	FIRST PRESE	NTATION OF MU	LTIPLE DEPENDENT		CLAIM			SECTION OF THE			1			
								+140= TOT			OR	+280= TOTAL	1	
							· (1)	ADDIT-F			OR'	ADDIT FEE	10 m	
		(Column 1) CLAIMS		Colur HIGH	nn 2) 🏬 EST	(Column 3)	1	2 % 1						
ENT C		REMAINING AFTER AMENDMENT		NUMI PREVIO PAID	BER DÚSLY	PRESENT EXTRA		RATE	ŢĮ	ADDI- ONAL FEE		RATE	ADDI- TIONAL FEE	
MON	Total		Minus	**				X\$ 9=			OR	X\$18=		
AMENDMENT	Independent	*	Minus	***				X42=	3			X84=		
7	FIRST PRESENTATION OF MULTIPLE DEPENDEN				CLAIM						OR			
	f the entry in colu	mn 1 je lece than th	e entry in column 2, write		"O" in col	mn 3	, V	+140=			OR	+280≐		
**	If the "Highest Nu	mn 1 is less than th mber Previously Pa mber Previously Pa	id For" IN THI	S SPACE is	s less than	n 20, enter "20		TOT/ ADDIT, FE			OR	TOTAL ADDIT FEE		
		iber Previously Pai					er fou	und in the	appro	priate box	k in col	umn 1.	• .	